

POSZ LAW GROUP, PLC

AUG 13 2008

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* NOT ADMITTED IN VIRGINIA
PRACTICE LIMITED TO FEDERAL PATENT,
TRADEMARK AND COPYRIGHT MATTERS

SPECIALIZING IN PATENTS, TRADEMARKS & COPYRIGHTS

FACSIMILE TRANSMISSION

URGENT

Date: 8/13/2008

Pages: 19 (including this cover page)

Fax No.: 571-273-8300

TO: USPTO

From: Cynthia K. Nicholson
Posz Law Group, PLC

RE: Resending a copy of the amendment filed on July 14, 2008

Comments:

Per your request, we are RE-sending the amendment that was originally filed on 7/14/08 (a copy of auto-reply fax transmission is enclosed).
Thank you.

Makiko Andrews
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Paralegal
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Auto-Reply Facsimile Transmission

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TO: Fax Sender at 7037079112

Fax Information

Date Received:

Total Pages:

7/14/2008 9:15:03 AM [Eastern Daylight Time]

17 (including cover page)

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Received
Cover
Page
=====>

8/14/2008 09:03 7037079112 POSZ LAW GROUP PAGE 01	
TRANSMITTAL FORM	
Please use for all correspondence with the Office.	
Total Number of Pages in This Facsimile: 17	
Application Number: 10/512,067	
Filing Date: 7/3/2003	
First Named Inventor: Katoh	
Art Unit: 1794	
Examiner Name: Victor S. CHANG	
Attorney/Agent Number: 24-007	
ENCLOSURES (Check all that apply)	
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply (14 pages) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavit/Declaration <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts: Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Non-identical Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD <input type="checkbox"/> After ACO communication to (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Pages 1001, 1002, 1003, 1004) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosures (please identify below)
Remarks:	
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Print Name: Posz Law Group, P.C.	Signature: <i>Cynthia K. Nicholson</i>
Print Name: Cynthia K. Nicholson	Reg. No. 34,523
Date: 14 July 2008	
CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being filed with the USPTO (201-773-8300) on the date shown below.	
Signature: <i>Cynthia K. Nicholson</i>	Date: 14 July 2008
Typed or printed name: Cynthia K. Nicholson	

EOT

**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Application Number 10/612,087

Filing Date 7/3/2003

First Named Inventor Katoh

Art Unit 1794

Examiner Name Victor S. CHANG

Total Number of Pages in This Submission

17

Attorney Docket Number

24-007

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AUG 13 2008

ENCLOSURES (Check all that apply)☒ Fee Transmittal Form☐ Fee Attached☒ Amendment / Reply (14 pages)☐ After Final☐ Affidavits/declaration(s)☒ Extension of Time Request☐ Express Abandonment Request☐ Information Disclosure Statement☐ Certified Copy of Priority Document(s)☐ Reply to Missing Parts/
Incomplete Application☐ Reply to Missing Parts under
37 CFR 1.52 or 1.53☐ Drawing(s)☐ Licensing-related Papers☐ Petition☐ Petition to Convert to a
Provisional Application☐ Power of Attorney, Revocation
Change of Correspondence Address☐ Terminal Disclaimer☐ Request for Refund☐ CD, Number of CD(s) _____☐ Landscape Table on CD☐ After Allowance communication to (TC)☐ Appeal Communication to Board of
Appeals and Interferences☐ Appeal Communication to TC
(Appeal Notice, Brief, Reply Brief)☐ Proprietary Information☐ Status Letter☐ Other Enclosure(s) (please identify
below):

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name

Posz Law Group, PLC

Signature

Printed name

Cynthia K. Nicholson

Date

14 July 2008

Reg. No.

36,880

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO (571-273-8300) on the date shown below.

Signature

Typed or printed name

Cynthia K. Nicholson

Date

14 July 2008

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FEE TRANSMITTAL

<input type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27	Application Number	10/612,087	AUG 13 2008	
	Filing Date	7/3/2003		
	First Named Inventor	Katoh		
	Examiner Name	Victor S. CHANG		
	Art Unit	1794		
TOTAL AMOUNT OF PAYMENT		(\$ 120)	Attorney Docket No.	24-007

METHOD OF PAYMENT (check all that apply)

☐ Check
 ☐ None
 ☐ Other (please identify):

☒ Deposit Account
 Deposit Account Number: 50-1147
 Deposit Account Name: Posz Law Group, PLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17

☒ Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	\$
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	160	80	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
21	- 22 or HP = 0	50	0			

HP = highest number of total claims paid for, if greater than 20 (22 claims paid for on 3/10/2005)

Indep. Claims Extra Claims Fee (\$)

7 - 7 or HP = 0 x =

HP = highest number of independent claims paid for, if greater than 3 (7 claims paid for on 9/12/2006)

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$ (\$ for small entity)

for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

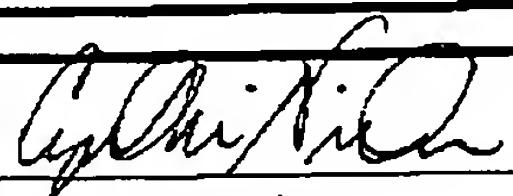
4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other, Petition for Extension of Time (one (1) month)

120

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	36,880	Telephone	(703) 707-9110
Name (Print/Type)	Cynthia K. Nicholson			Date	14 July 2008